

County: **Fulton**

New York State Department of Health AIDS Institute
HIV Counseling and Testing Resource Directory 2004 [Januray 2006 Update]

Organization	HIV Test	Test Method	Type of Visit	Language*	Fee Information*	Service Features / Limitations
Name, Address, Appointment Number, and URL	Anonymous Test	Standard and Rapid Testing Available				(Please call for details)
Fulton County Public Health Department 2714 State Highway 29 Johnstown NY 12095 (518) 736-5720	<input type="checkbox"/>	<input checked="" type="checkbox"/> Blood <input checked="" type="checkbox"/> Oral Fluid <input type="checkbox"/> Rapid Blood <input type="checkbox"/> Rapid Oral Fluid	<input checked="" type="checkbox"/> Walk In <input checked="" type="checkbox"/> By Appointment <input type="checkbox"/> Evening Hours <input type="checkbox"/> Weekend Hour	<input checked="" type="checkbox"/> Eng. <input type="checkbox"/> Chi. <input checked="" type="checkbox"/> Sp. <input type="checkbox"/> Rus. <input type="checkbox"/> Fr. <input type="checkbox"/> ASL <input type="checkbox"/> Cre. <input checked="" type="checkbox"/> Oth.	<input checked="" type="checkbox"/> A. <input type="checkbox"/> D. <input type="checkbox"/> B. <input type="checkbox"/> E. <input type="checkbox"/> C. <input type="checkbox"/> F.	Serves county residents only. Operates satellite service site. Call for location.
Planned Parenthood Mohawk Hudson, Inc. - Gloversville 257 Kingsboro Avenue Gloversville NY 12078 (518) 773-7303 www.ppmhchoices.org	<input type="checkbox"/>	<input checked="" type="checkbox"/> Blood <input type="checkbox"/> Oral Fluid <input type="checkbox"/> Rapid Blood <input type="checkbox"/> Rapid Oral Fluid	<input type="checkbox"/> Walk In <input checked="" type="checkbox"/> By Appointment <input checked="" type="checkbox"/> Evening Hours <input type="checkbox"/> Weekend Hour	<input checked="" type="checkbox"/> Eng. <input type="checkbox"/> Chi. <input type="checkbox"/> Sp. <input type="checkbox"/> Rus. <input type="checkbox"/> Fr. <input type="checkbox"/> ASL <input type="checkbox"/> Cre. <input type="checkbox"/> Oth.	<input type="checkbox"/> A. <input checked="" type="checkbox"/> D. <input checked="" type="checkbox"/> B. <input checked="" type="checkbox"/> E. <input checked="" type="checkbox"/> C. <input type="checkbox"/> F.	Serves established patients/clients and their partners only.

***Table Key:** Language: Eng. - English Cre. - Creole ASL - Sign Language Fee Information: A. Free of charge to all clients regardless of their ability to pay. D. Accept 3rd-party private insurance.
 Sp. - Spanish Chi. - Chinese Oth. - Other Languages. B. Free of charge or reduced fee based on client income. E. Accept out-of-pocket payment.
 Fr. - French Rus. - Russian Call for details. C. Accept government programs (e.g. Medicaid, Medicare, and ADAP+). F. Other payment method. Contact provider for details.